SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

16 X 17a 17b 17c 17d 18
19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) DEANN GEARY Mailing Address 51 BENTLEY DRIVE		Transaction ID : SA17.417097 Date of Receipt 07 31 2015
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer TIFFANY WIGS; INC.	Occupation SELF EMPLOYED	100.00
Receipt For: 2016 ✓ Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 285.00	
Full Name (Last, First, Middle Initial) MR. ROGER A. GEARY		Transaction ID : SA17.429088 Date of Receipt
Mailing Address 478 STOVER SHO[P ROAD		08 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CHURCHVILLE	State Zip Code VA 24421-2206	CONTRIBUTION
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer WOODROW WILSON REHAB CENTER	Occupation VOCATIONAL EVALUATOR	300.00
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date 750.00	
Full Name (Last, First, Middle Initial) MR. ROGER A. GEARY		Transaction ID : SA17.437737 Date of Receipt
Mailing Address 478 STOVER SHO[P ROAD)	08 05 Y Y Y Y Y Y
CHURCHVILLE	State Zip Code VA 24421-2206	CONTRIBUTION
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer WOODROW WILSON REHAB CENTER	Occupation VOCATIONAL EVALUATOR	100.00
Receipt For: 2016 ✓ Primary General Other (specify) ▼	Election Cycle-to-Date 750.00	
Subtotal Of Receipts This Page (option	nal)	500.00
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